



Chailey
Heritage
School

pursuing potential

Chailey Heritage Individual Learner Driven Curriculum

"The CHILD is the curriculum"

Part 1: Rationale and Practice

(constituting the school's teaching,
learning and assessment policy
and SEND policy)

Chailey
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Individual
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Curriculum

September 2017



Contents

"The CHILD is the curriculum"

01.

Rationale

02.

Flowchart

03.

Target setting and co-production

04.

Delivery of the CHILD Curriculum

05.

Capturing progress and assessment for learning

06.

Summative assessment



Chailey Heritage Individual Learner Driven Curriculum: 'The child is the curriculum'

Our Vision

Every young person at Chailey Heritage School will be given every opportunity to make progress towards fulfilment. We will never, ever give up looking for ways to support our young people to make their own choices in life, and to achieve their own desired destinations.

The children and young adults at Chailey Heritage School (our 'learners') have a huge range of physical, sensory, learning and medical needs. Their cognitive abilities are from SPMLD, those who are learning in a very sensory context, right through to those who, while 'locked in' by their physical complexities, are nevertheless learning to read, tell the time and manage money, through more formal 'subject-specific' approaches.

Children with learning difficulties have unique ways of learning. Penny Lacey in 2009 wrote that these learners will "struggle with inefficient and slow information processing skills as well as difficulties with generalisation and problem solving". At Chailey Heritage, our learners have the added complexities, of physical, sensory and medical difficulties. The multiplicity of these means that each and every learner has their own individual set of barriers to learning.

It is obvious that a child who is blind will not be able to learn about colours in the same way that a sighted child will. It may be less obvious that a child who cannot manipulate objects will have barriers to learning numbers, or coin values or shapes. For a non-verbal child, learning to read by phonics is much more difficult. A child who is confined to a trolley-bed will not be able to access many resources available to wheelchair users, never mind ambulant children. A blind, non-verbal child, restricted to a trolley-bed, has a multiplicity of barriers to learning, unique to him, and we must pursue his potential using detailed knowledge and highly specific skills.

While we do, of course, take ideas from the many respected thinkers in SEND education (inspirational teachers such as Penny Lacey; Jo Grace; Peter Imray; Flo Longhorn; Dave Hewett & Melanie Nind, Barry Carpenter, Jean Ware and more) we still believe that there are no standard or uniform teaching techniques which meet all of these learners' needs or support them to overcome all of these barriers. There is not a single menu of interventions and approaches, and there is no one curriculum which could possibly fit all our pupils. Each needs a unique curriculum: 'the child **is** the curriculum'. Above all, everything we do, and everything each learner experiences, must be meaningful, and we must all, as educators, know why we are doing what we are doing with our learners (which at Chailey Heritage we call 'The Why Imperative').

We see it as our fundamental job, to find the very best interventions and teaching techniques for each learner, through researching what is best practice in the wonderful work in the SEND community, but even more importantly, through knowing our learners as best as we can. We have developed our very own approach, building a learning framework for each learner, directly from a deep and thorough assessment and understanding of each child and how they might be helped to make progress. The child, parents and family, therapists, teaching and residential teams are all involved in the assessing of needs and the devising of the 'my next steps' (MNSs) fundamental to our individual learning frameworks. It is a truly integrated approach, which works.



Chailey Heritage Individual Learner Driven Curriculum: 'The child is the curriculum'

At the heart of our approach is the recognition that learning and development across all areas are underpinned by our understanding of engagement - the way each individual engages with other people, activities, their environment and any stimuli. Using the Early Years Foundation Stage (EYFS) model of '*Characteristics of Effective Learning*' we seek to nurture life-long learners who, rather than just being recipients of support, are motivated, inquisitive and active participants in their unique curriculum.

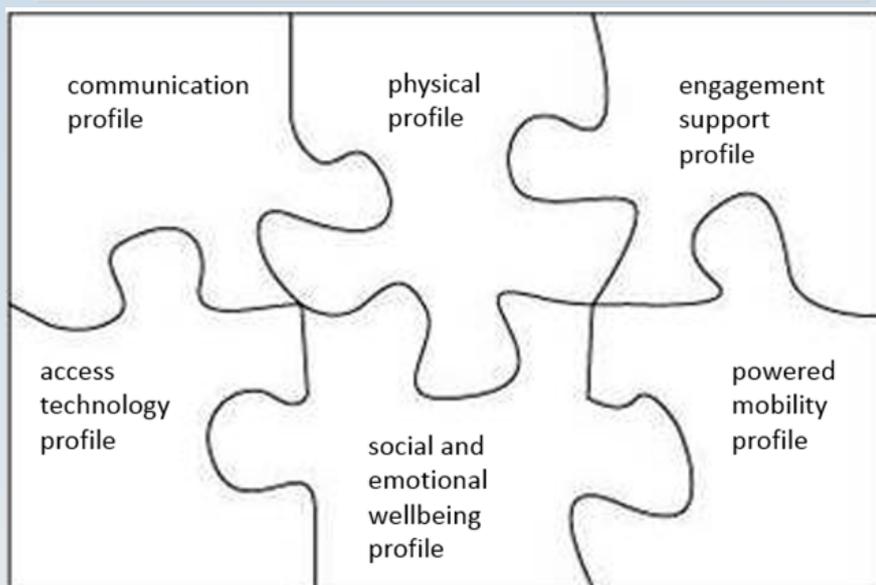
We do recognise the need for a 'broad and balanced curriculum' and this will mean different things for different pupils. We do take ideas and methodologies from documents produced by the Department for Education and elsewhere. In particular, we find the EYFS framework particularly helpful, no matter what the age of our learners. However, whatever we take must be relevant and appropriate to the developmental needs of each pupil, in order for meaningful learning to occur. There is no single curriculum that suits all our learners, no 'set' of subject areas, no bank of targets to be chosen from. Every MNS must be part of a functional and meaningful path for that child, not part of a pre-programmed or linear route. We must have no pre-conceptions of any learner's path of progress or we are in danger of limiting our expectations of where they may branch out. We must follow the child, and we always expect to be surprised!

The CHILD is the Curriculum

PROFILES

Deep and detailed knowledge and understanding of the learner.
Reviewed and updated by teachers.

Core Profiles – for all learners
Incorporating Long Term Outcomes and ‘My Next Steps’
Plus activity ideas and bespoke advice on best practice strategies and requirements for the learning environment to promote *Effective and Meaningful Learning*



Functional Skills Profiles - For some learners,

Functional skills are directly related to real skills needed for now and for transition and the future. Examples are independent eating, helping with getting dressed, understanding and helping with own personal hygiene.

Subject Specific Skills Profiles (SSSP) – for some learners

The highest ability learners, who are learning at a subject-specific level, have a SSSP. This details their attainment and achievement in English and Maths, with their long term goals in these subjects.
Detailed next steps are kept in learners’ workbooks

ASPIRATIONS

Every learner will be given every opportunity to progress towards fulfilment.

Learners’ Aspirations
Are fundamental to the **All About Me Profile**

Parental Aspirations
Sought at least twice per year, informs all profiles, next steps and long term outcomes

PLANNING

My Next Steps
Medium Term Plan
Outcomes and Next Steps chosen by teacher and family as the key aspects we are currently working on.

My Progress Plan
Long Term Plan
The collation of long term outcomes and Next Steps from all the profiles Under the EHCP headings

OUTCOMES

EHCP Annual Review
Summary document for the AR noting context and progress made under the 5 EHCP headings:

- Communication and interaction
- Cognition and learning
- Emotional, social and behaviour
- Sensory and physical
- Independence and community involvement

My Next Steps Achieved
Chronological list of achievements building a picture of achievement over time.

THE BROAD AND BALANCED CHILD CURRICULUM

Chailey Heritage Individual Learner Driven Curriculum

Every learner has their own curriculum.

- It is built specifically for them based on their skills and desired outcomes.
- It is **Broad** in that it covers all aspects of their development.
- It is **Balanced** in that it weighs up, specifically for them, the input that is needed.
- It is completely integrated with the therapeutic input, sharing targets and methods.
- It takes into account parents’ aspirations and ideas

We ensure the curriculum is ‘Broad & Balanced’ through:

- Creative and flexible timetabling
- Interesting and diverse topics
- Specialised ‘theme’ events in departments and across the school
- Teaching ‘subjects’ where this is appropriate

We integrate into our planning and timetabling:

- All therapy requirements
- Social, Moral, Spiritual and Cultural development (SMSC)
- Sex & relationships education
- Religious Education (RE)
- Collective Worship
- Community visits to us and out into the community
- Partnerships with other schools
- College links
- Family links
- Celebrations
- Fun and enjoyment

Chailey Heritage Individual Learner Driven Curriculum: 'The child is the curriculum'

Target Setting and Co-production: the integration of teachers', therapists, care staff and parents' advice to the CHILD Curriculum

Baseline assessment

New pupils have baseline profiles written by the receiving teacher with support from our specialist baseline assessment teacher. This process involves using all available information, and as much consultation as possible, to compile the first drafts of the child's profiles. The profiles include the first drafts of 'long term outcomes' and 'MyNext Steps' which form the child's curriculum. To baseline we use:

- information from parent and family consultation, including homevisits
- any written documents from parents
- any documents provided by previous schools/teachers, therapists and other specialists
- any up-to-date advices that had been prepared for EHCPs
- assessment information from clinical services assessments including: nurses; doctors; SaLTs; OTs; physios; behaviour support specialists; dietician etc.
- assessment information from school assessment including, as appropriate: sensory impairment specialist teacher; SPMLD specialist teacher; subject specific lead teacher; EYFS lead teacher; PSHE/SRE lead teacher.

Curriculum documents ownership

The profiles are 'owned' by the teacher and team, but therapists also take on a lead role for ensuring the profiles and targets are as accurate as possible as below:

- Occupational therapist
 - Access technology profile, with teacher, ICT coordinator and SaLT.
 - Eyegaze profile section of the AT profile
 - Powered mobility profile. (Nb the powered mobility profile is for all pupils who have powered mobility opportunities, not just those who are learning to be independent drivers.)
 - Functional skills profile, especially life skills.
- Physiotherapist
 - Physical profile, with hippo-therapist and swimming coordinator.
 - The physical profile is linked to each pupil's physical timetable.
- Speech and language therapist
 - Communication profile, with teacher.
 - Access technology profile, with teacher, ICT coordinator and OT.
 - Eyegaze profile section of the AT profile
 - Eating and drinking next steps, which may come under various profiles.
 - Oral skills next steps, which may come under various profiles.
- Teacher
 - If the child has the ability to learn at a 'subject-specific level' (SSL), i.e. may make meaningful progress in Maths and Literacy, they will have a SSL profile, which will contain the aspirations and long-term outcomes for these subjects,

(with the current next steps being worked on recorded in the child's workbooks.) These long term outcomes and MNSs must be useful and meaningful.

Quality assurance

As well as the oversight of the profiles by the specialists as above, each set of draft profiles for every child is read and quality assured by the Headteacher.

Approximately eight weeks after entry to the school, the child's family is invited to a new pupil meeting, as per the SEND code of practice. This meeting is chaired by the Headteacher, and attended by the child's teacher; the family liaison worker; residential key worker if appropriate; and the child's team of therapists. At this point, with eight weeks' more knowledge of the child, all draft profiles and MNSs are discussed, refined and agreed.

Amending and updating profiles and targets

It is a fundamental and vital part of the CHILD curriculum, that this is ongoing. Communication between teaching teams and therapists is day-to-day, and parents are consulted as and when appropriate. Teachers and their teams review and update targets, MNSs in particular on a daily and weekly basis. However, there are some key points in the calendar:

- Individual Pupil Review Meeting (IPR) – the major annual checking of the profiles
 - Teacher, link TA, residential key worker, SaLT, OT, Physio meet to review the profiles including MNSs.
 - Each leads the discussion on the profiles or sections of profiles which they own (as above).
 - Additions, updates, alterations (and removals) of long term outcomes and MNSs are made.
 - New ideas are brought forward and discussed.
 - Particular progress is noted by the teacher for report writing and meeting with parents.
 - Teachers update all documentation ready for the parent consultation.
- Post-IPR parent consultation
 - Teacher consults with parents, for their input and ideas.
 - Agreement is reached on the wording of the profiles, aspirations, long term outcomes and next steps.
 - Teacher updates and distributes all profiles.
- Annual Review of the statement/EHCP
 - Teacher and key member of care staff if appropriate, gather all records of progress made
- The 'my progress plan – progress made' report is updated to give examples of where progress is being made, and in what context. This is written under the EHCP outcomes:
 - Communication and interaction long term outcome
 - Cognition and learning long term outcome
 - Social and emotional wellbeing long term outcome
 - Sensory and physical long term outcome
 - Independence and community involvement long term outcome
- The 'My Next Steps Achieved' document is presented.



Chailey Heritage Individual Learner Driven Curriculum: 'The child is the curriculum'

- Further information and input is gathered from the parents and local authority representative and any other professionals attending.
- Agreement from all attending that the profiles are accurate and MSNs are pitched correctly is reached
- Profiles are then updated by the teacher and are distributed, along with the MNS document.

Delivery of the CHILD Curriculum

Learning throughout the day

It is fundamental to the CHILD curriculum that we can be helping the learner make progress towards all their MNSs, no matter what the activity they are engaged in, at any time of the day. This includes break times, play times, off-site visits (even the journeys), toilet time, eating time and so on. Therapies are also integrated throughout the day, and throughout the learning, with the curriculum supporting the delivery of therapy and therapy supporting the learner progress.

Each learner has their own curriculum, in the form of their own aspirations, long-term outcomes and MNSs arrived at by in-depth profiling by teachers, therapists and parents. It is therefore necessary that every learner also has their own individual timetable, complete with their physical program and any 1:1 or group work with professionals as prescribed. These are detailed in every child's 'all about me folder' which will be with them at all times for reference.

Individual timetables

With every learner having their own personalised set of MNSs which constitute their own individual curriculum, the teachers, therapists and teaching teams will be focusing on different aspects of development for each child, in each activity and at each part of the day. This is very complex and requires detailed planning, but also huge flexibility – it is vital that we have dynamic, reactive planning and responsive delivery. We need to be able to take every opportunity that the children present, as we cannot predict what their physical state might be, nor their levels of alertness, nor always what stimulus works or doesn't. There are very few 'lessons' in the old-fashioned sense of children listening to a teacher and following instructions, rather we try what we think might work and then follow the children's responses to see where we might go next, and this mostly means on an individual basis, or very small groups within a class.

"There is no rigid timetabling or predetermined balance of focus. Each piece of planned learning and progress forms part of a functional and meaningful path for that child taking whatever direction the learner needs. This means we have no pre-conceptions of any learner's path of progress so we do not limit our expectations and allow the learner to lead us in their journey." (from the website of Mayfield School, Chorley.)

Class timetables

However, each teacher needs a framework for the day. So, overlaid on the children's individual timetables, and wrapped around the flexibility of each learning period, there is a scaffolding of class and department timetabling. Even within departments there will be different styles of timetable for the different needs of different classes and learners, ranging from the very free-flowing, slow-paced, reactive practice for PMLD and early years, through to a semi-formal, more structured approach for the most high-ability learners who have a more subject-specific curriculum, or for those who require a high level of structure such as those on the autism spectrum.

Whole school subjects

Chailey Heritage Individual Learner Driven Curriculum: 'The child is the curriculum'

There are some areas of learning which, for different reasons, need to be covered by the CHILD curriculum. However, it is vital that we make these meaningful: we will never put anything in the children's day just because it is prescribed by any external agency, just as we would never use any SEND practice 'off the peg', without knowing how and why it might benefit our learners.

- Physical: All children have their own physical program; including physiotherapy; aquatic therapy; hippotherapy; rebound therapy; standing; cycling etc. Wherever possible, physical activity is functional and meaningful. For example, walking in a specialist walking frame to see a friend in another class, or trike riding to see the animals at the Hub.
- Sex & relationship education; personal, social & health education (SRE/PSHE): We have very detailed and carefully considered teaching approaches for all aspects of these, personalised for each child, their needs and abilities. We have disability specific resources, and in-house training for staff. MNSs for all of the children include SRE/PSHE targets as appropriate, overseen by the school's lead teacher as well as class teachers and with input from parents and families. Helping the children to understand how to keep safe, to whatever degree they can, when they rely completely on adults for all their care is vital.
- Spiritual, moral, social and cultural development (SMSC) and promoting shared values: each department keeps an audit of their coverage of SMSC, in a department 'SMSC Scrapbook'. With such a huge range of cognitive ability to teach, SMSC is interpreted in creative and thoughtful ways, keeping as close as possible to the spirit of what SMSC is meant to convey and promote. All of our children are given opportunities to have experiences related to other cultures than their own, and to have time for reflection.
- Religious education (RE) and Collective Worship: as with SMSC, we interpret the purpose of RE for our children. All our children are given time and opportunity for spiritual experiences at whatever level is meaningful for them. Those who can and do express wishes to do with their faith, will have opportunities to worship, but we do not set up collective activities unless they are meaningful to each individual.
- Music: All children have a weekly class music session with a music specialist teacher. The class teams use the music session to develop their MNSs, as well as for enjoyment; social interaction and developing musical skills if appropriate. Activities and ideas from music lessons are also used by teachers back in class.
- Subject specific learning: a small minority of children who are working at a subject specific level will have targets related to these subjects, particularly Reading (symbols or words), Speaking & Listening (using alternative and augmentative communication systems, high and low-tech) and Maths (in particular functional skills such as telling the time; using money). There is no pre-determined set of expectations for the children in these subjects – as with the rest of the CHILD curriculum, these targets are personalised to each child ensuring that they are meaningful.
- Functional skills: wherever any of the children can achieve any sort of independence, this is pursued and promoted through their MNSs. Functional skills can include (as examples) continence; assisting with personal hygiene; helping when dressing; eating and drinking skills; mobility and so on. All children who can achieve or are working towards any of these targets will have a Functional Skills Profile.



Chailey Heritage Individual Learner Driven Curriculum: 'The child is the curriculum'

School Departments

All departments, with learners aged from 3 to 19, use the principles of the Early Years Foundation Stage in their teaching, with importance being placed on the characteristics of effective learning. They all use the CHILD curriculum, and they all will teach according to the child's stage of development rather than their age, although age-appropriateness is always considered and may lead to social & emotional wellbeing MNSs if this is agreed as a positive aim.

The CHILD curriculum is consistent throughout all departments and age ranges, although the content of the timetable does alter for those who are post-16 (years 12-14). These young people have a focus on transition, with additional time and opportunities to experience the wider community, and to visit and become familiar with potential post-19 placements, in preparation for moving on from the school.

Each year, class groups and department groups are considered, taking into account the needs and abilities of the children. While each department has its own character and identity, they all share the same vision and ethos around teaching and learning. No matter what the child's ability, they progress through the school, experience different environments, peer groups and staff teams. This brings opportunities to learn about different people and systems, helping prepare them for future transitions.

St Martin's department

This department has the youngest pupils. Currently (May 2017) it has four classes with 29 pupils from Reception to year 4. These classes are roughly arranged in age order, but with one class with mainly subject-specific learners operating on a more structured, 'semi-formal' curriculum. This class has literacy and Maths sessions as part of the class timetable, with more structured learning than in the other classes.

Seymour department

This department is the middle department in terms of the age of the pupils. It currently has 5 classes with 33 pupils, ranging from year 4 to year 11. Pupils are grouped with reference to age, ability and other needs. There are currently three specific specialist classes in the department: one sensory-led class, one more subject specific class, and one specialist class for children who require a very physical timetable and a safe environment to explore, as well as two other more mixed ability classes. Timetables for each class are different, as appropriate for the needs of the children.

Hanbury department

This department has the older children and young adults. There are currently 24 pupils, from year 10 to year 14. There is one specialist sensory class and 2 more mixed ability classes, including some pupils who are working at a subject-specific level. The timetable in Hanbury includes subject specific and functional skills sessions for the most able. There are very focused sessions for SRE & PSHE, preparing the pupils for transition from the school.

Particularly for those who are post-16, there are choices of lessons/sessions in college style, and an emphasis on experiencing the community in greater depth, and preparing for transition.

Chailey Heritage Individual Learner Driven Curriculum: 'The child is the curriculum'

Assessment for learning (AfL) and capturing progress with the CHILD curriculum

Each learner has their own curriculum, in the form of their own long-term outcomes and 'My Next Steps' (MNS) arrived at by in-depth profiling by teachers, therapists and parents. There are no set 'banks' of targets to be chosen from, and there are no targets which are worked on by a whole class at any one time. Therefore, teachers and their teams need to capture progress for each child on all of their individual targets and use this information to plan future opportunities for learning for each of them.

The most important assessment, used all the time, is formative assessment, or assessment for learning (AfL). This is the constant monitoring of progress, and also the monitoring of techniques and experiences and activities to see what actually works well for each learner. All children learn in different ways and are stimulated by different things. The teaching team use observations from every activity to inform their planning for the future. They also refer to the specialist teachers, therapists and parents to check that their assessment is consistent with the observations of the multidisciplinary team.

Capturing progress

During any session, including times without direct teacher input, such as lunchtimes, hygiene times and therapy times, those working with the children know what MNSs the children are working towards. There are copies of each child's MNSs available at all times and there is an expectation that these should be consulted. There will also be times when particular MNSs are being focused on in particular activities.

From these activities, staff are all expected to contribute evidence of progress towards these MNSs, and are trained to do so. Post-its are used for this, dated and initialled, with a brief observation and context. These are displayed by the child's MNS document, usually on a class wall.

It is very important to note that 'other' unexpected signs of progress are also captured, and that these can be used to create new MNSs. This is crucial to the CHILD curriculum, which never has set expectations of any child, other than that they will all make the progress that they can.

Using the observations

Teachers regularly and systematically read and organise and collate the observations for each child in their class. The post-its are kept in a class Child Assessment Folder of Evidence (CAFÉ file), each observation filed in a wallet for the particular MNS. This information is used for planning for future teaching.

When there is sufficient evidence that a MNS has been met, the MNS is marked as achieved. The MNS is then deleted from the child's curriculum, and noted as achieved on their progress plan documents. The wallet of observations for that MNS is transferred to the child's Learner Progress File (LPF). This is kept as evidence of progress.

Where there is little evidence of progress for an MNS, the target is reviewed by the team. Different opportunities or approaches may be considered. It may be agreed that the MNS was not appropriate or that it is no longer achievable, and may be changed or removed. This reviewing of MNSs is continuous and is a core part of the effectiveness of the CHILD curriculum.

Chailey Heritage Individual Learner Driven Curriculum: 'The child is the curriculum'

Learner Progress: summative assessment at Chailey Heritage School

Each of our learners has a unique and multiple set of challenges:

- All have a severe physical disability, all are wheelchair users
- Almost all are non-verbal
- Nearly all have some kind of cognitive difficulty, but there's a massive range from profoundly low levels up to possibly 'normal' levels, but locked in
- Most have a sensory impairment, some have more than one
- All have complex medical needs
- Some have degenerative conditions

The diversity and multiplicity of the needs and abilities of our learners means that a standard assessment scale, with a predefined set of level descriptors, is impossible to create or use. This means that is not possible to use numeric data to compare the progress of our learners to 'national statistics' or to 'similar' learners in other schools, or to each other.

Similarly, 'expectations of progress over time' (as predicted in such programs as CASPA) is not a meaningful concept for our learners. As well as there being no standard measurement tool, as stated above, there are too many factors which affect progress, positively or negatively, in any given timescale. Some examples are:

- operations and the after-effects of these
- altered health states
- drug changes
- lengthy or frequent stays in hospital
- increased or decreased seizure activity
- degenerative conditions
- changes to postural management
- new technology
- changes to domestic circumstance

Our assessment is therefore ipsative – we compare our learners with themselves at a previous point in time, describing what they can do now compared to what they could do before. There are no quantitative comparisons, no expectations of numbers of MNSs to be achieved.

In order to ensure that we have the highest expectations of each child's progress, we rigorously monitor our input to them, believing that if the input to each child's learning is the very best it can be, then the progress made by that child, whatever that is, will be the very best that the child could have made, (see document entitled 'how is my performance monitored as a teacher at Chailey Heritage School?').



Chailey Heritage Individual Learner Driven Curriculum: 'The child is the curriculum'

Our summative assessment has two parts:

1 Annual review progress document

This is an annual document written by the teacher in collaboration with therapists, for the AR meeting. It describes the progress made under each of the 5 EHCP headings:

- o Communication & Interaction
- o Cognition & learning
- o Social & emotional well being
- o Sensory & physical
- o Independence (and community involvement)

This document is descriptive, it gives the context for the progress as well as how it was supported and achieved. The document may also describe additional barriers to learning which have occurred in the previous 12 months, or circumstances which have benefited and accelerated learning.

2 'My Next Steps Achieved' document

This is a list of the MNSs that have been evidenced as having been achieved. This is kept up to date by teachers on a central document on the network. The evidence for each of these is kept in the child's Learner Progress File.

This document will be kept over the years so that long-term progress can be scrutinised, which is particularly important for those with SPMLD who may make tiny steps of progress over long periods of time.

As described at the beginning of this section, we are unable to provide graphs or numerical data on learner progress that has any meaning. Therefore, our summative assessment is described in minute detail for each child, and every teacher is prepared for rigorous scrutiny about the progress they have enabled (see the Learner Progress Interview pro-forma)



Proud to be working with our partners, Sussex Community NHS Foundation Trust, Chailey Clinical Services, to deliver properly integrated, highly specialist services to meet education, health and care needs.

Chailey Heritage School is part of Chailey Heritage Foundation, a pioneering charity providing education, care and transition services for children and young people with complex physical disabilities and health needs.



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Chailey Heritage Foundation

Haywards Heath Road
North Chailey, Lewes
East Sussex BN8 4EF

t: 01825 724444
e: office@chf.org.uk
www.chf.org.uk

Registered Charity No. 1075837 and Company limited by Guarantee No. 3769775 (England)